



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET**CONFIRMATION NO. 8415**

Bib Data Sheet

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|---|
| SERIAL NUMBER 10/656,829 | FILING DATE 09/05/2003 RULE | CLASS 359 | GROUP ART UNIT 2872 | ATTORNEY DOCKET NO. S1459.70062US00 |
|-----------------------------|---------------------------------------|--------------|------------------------|---|

APPLICANTS

Hidehiko Sekizawa, Tokyo, JAPAN;

Seiji Sato, Kanagawa, JAPAN;

** CONTINUING DATA *****

None/m

** FOREIGN APPLICATIONS *****

JAPAN JP2002-262174 09/06/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/28/2003

| | | | | | |
|--|---|------------------------------|-------------------------|----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <u><i>[Signature]</i></u> Examiner's Signature Initials | STATE OR COUNTRY JAPAN | SHEETS DRAWING 32 | TOTAL CLAIMS 9 | INDEPENDENT CLAIMS 2 |
|--|---|------------------------------|-------------------------|----------------------|----------------------------|

ADDRESS

Randy J. Pritzker
 Wolf, Greenfield & Sacks, P.C.
 600 Atlantic Avenue
 Boston, MA
 02210

TITLE

Polarizing eyeglass device

| | | |
|-----------------------------------|---|---|
| FILING FEE RECEIVED 900 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|---|---|